



APPLICATION FOR LICENSE RENEWAL / REINSTATEMENT

LICENSE NUMBER	PROFESSION TITLE	EXPIRATION DATE	RENEWAL FEE	REINSTATEMENTS	INTERNET RENEWAL ID NUMBER
	Clinical Social Worker	9/30/2004	\$93.00	Additional fees are required after the expiration date. See next page for details.	Please call DOPL for your Internet Renewal ID Number

↓ NAME AND ADDRESS OF RECORD ↓

↓ SIGNATURE REQUIRED* ↓

SIGN HERE:

I hereby certify that I have completed or will complete all renewal requirements before the expiration or reinstatement of my current license. I understand that I may be subject to audit.

I also certify that, except as disclosed in writing and attached hereto, that since the last renewal of this license, or if this is the first renewal of this license, since the initial issuance of this license, that I have not been arrested for, charged with, convicted of, pled no contest to, or made a plea in abeyance to a crime which bears a reasonable relationship to my ability to safely or competently practice. I also certify that I have not had any disciplinary action taken against my license in any other state since the last renewal of this license. *

(Detach carefully along this line.)

**IF ANY OF THE INFORMATION LISTED ABOVE IS INCORRECT,
PLEASE MAKE ANY NECESSARY CHANGES ON THE BACK OF THIS FORM.**

SPECIFIC REQUIREMENTS Additional requirements that apply to your occupation or profession are as follows:

****NOTE****

As a condition of renewal of licensure you must complete 40 hours of continuing professional education (CPE) for the period ending on September 30, 2004. However, if you received your initial license during the renewal cycle, you are only required to complete a pro-rata amount of CPE for the time you were actually licensed.

You are required to keep documentation of the CPE hours completed, however, you do not need to submit documentation of CPE hours completed unless you are audited and are requested to do so.

If your renewal application and renewal fee are not returned to DOPL by August 31, 2004, you stand the risk of not receiving a renewed license before the expiration of your current one.

* If you are unable to sign the certification above, you must submit with this renewal complete documentation regarding the incident(s). Complete documentation includes any police arrest report, court docket, and probation/parole officer report for each and every arrest and/or conviction. Failure to sign does not mean the license will not be renewed; however, DOPL may request additional information if the documentation is insufficient.

ON-LINE RENEWAL INFORMATION Save time by renewing your license online at www.dopl.utah.gov

Most Utah licensees can now renew their professional licenses on-line by using a credit card and a unique "Internet Renewal ID Number" – located on the notice you received in the mail. The new timesaving system allows a renewing licensee to immediately print out a confirmation of renewal that is as valid as a license certificate. Additionally, a renewed license certificate will be mailed to the licensee's address of record within two weeks after the online renewal process is completed and processed.

RENEWAL / REINSTATEMENT CHECKLIST See next page for detailed instructions.

- ☐ **Sign the above coupon** for both certification boxes. (If your legal name has changed, submit verification of such.)
- ☐ **Pay the correct fee.** If you are reinstating a license after the expiration date, you must pay an additional reinstatement fee.
- ☐ **Sign your check or money order.** (Make checks or money orders payable to "DOPL.") **DO NOT SEND CASH.**
- ☐ If renewing by mail, submit only your **coupon** and **check** in the enclosed return envelope. All other documentation or information must be mailed in a separate envelope to the address listed at the top of the coupon.

Unlawful Conduct: Your license expires on the expiration date shown above unless the license is renewed. If the license expires, you may not practice until a new license is issued. Subsection 58-1-501(1)(a) and Section 58-1-502. U.C.A., respectively, make it unlawful and punishable as a criminal offense to practice your occupation or profession beyond the expiration date on your license.

NEW MAILING ADDRESS CORRECTION ONLY

Use this space to make any address corrections. Please note that this will be used as your public address of record, which means it is available upon request and via the Internet. It is also the address that will be used for all future correspondence from the Division. You may choose to use a business address or a post office box instead of your home address.

New Address: _____

City: _____ State: _____ Zip: _____ Phone: (____) _____ - _____

LEGAL NAME CHANGE

If your legal name has changed, you must verify the change by attaching a copy of a marriage certificate, divorce decree, court order, driver's license, or social security card. Mail these changes with your coupon, payment, and documentation to DOPL, P.O. BOX 146741, Salt Lake City, UT, 84114-6741.

Last: _____ First: _____ Middle: _____

Social Security Number: _____ - _____ - _____

(Detach carefully along this line if needed.)

INSTRUCTIONS FOR LICENSE RENEWAL / REINSTATEMENT

TIMELY RENEWAL: It is your responsibility to comply with all renewal requirements stated in statute and rule and to promptly submit a completed Application for License Renewal. Due to the volume of renewals to be processed, it can take up to 30 days to process an application. If your completed application is not received at least 30 days before the expiration date shown on the coupon, the Division cannot guarantee that you will receive a new license before your current license expires. You can also renew online at www.dopl.utah.gov where you can immediately print out a confirmation of renewal.

APPLICATION APPROVAL: Your application will be approved unless it is apparent that you do not meet the renewal / reinstatement requirements. Professions with specific requirements listed on the front of this form may be subject to audit by the Division. Those selected for audit will be notified. Please note that the Division reserves the right to initiate action at any time against a licensee who did not meet the renewal / reinstatement requirements at the time the license was issued.

NON-REFUNDABLE FEES: Renewal fees paid with this application are for processing your request for renewal of licensure and are non-refundable. Please be aware that simply paying the fees does not mean that your license will be automatically renewed unless you meet the current renewal requirements and thereby qualify for a renewed license.

REINSTATEMENT FEES: If you fail to renew your license before the expiration date shown on the coupon, you will be subject to the following conditions:

- A) If you are reinstating your license within 30 days after the expiration date listed on the front of this form, you must submit the renewal fee **PLUS** an additional \$20.00 for **EACH** license being reinstated.
- B) If you are reinstating your license after 30 days and within two years of the expiration date listed on the front of this form, you must submit the renewal fee **PLUS** an additional \$50.00 for **EACH** license being reinstated.
- C) Fees are subject to change each July 1. The fees on the coupon are current at the time this form was printed. Please verify the current fee at www.dopl.utah.gov if applying for reinstatement more than one year following expiration of your license.

NOTICE: If you fail to reinstate your license within 2 years of the expiration date of your license, you must submit a new application, meet current requirements for licensure, and pay the fees specified in subsection R156-1-308d(3).

INFORMATION UPDATES: You are responsible to immediately notify the Division of address or name changes as they occur. Please do not rely on forwarding orders to provide the Division with this information. Additionally, if your name change represents a new business entity, you must submit a new application for licensure before beginning practice as the new entity.

TAX ID NUMBER: The Tax ID Number for the Division of Occupational and Professional Licensing is 87-6000545.